## CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

## To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives notice of the action(s) indicated below:

The assumed business name is:	
The assumed business name was formula on as file number	filed with the Secretary of State's Office
<u> </u>	o filed the certificate no longer claim an interest in name and cancel the certificate in its entirety.
4. The assumed business name i	is amended to:
	addresses of the entity or individuals doing business name are amended as follow:
Add: Delete: Name:	Address:
6. The type of business is amen	ded to read:
Wholesale Trade Agr	nufacturing
7. The name and address to wh is changed to read:	ich future correspondence should be addressed
8. Name and address for this acknowle	edgment copy is:
	Secretary of State use only
	<sub>p</sub>
Signature:	g):corp/forms/abramend.pmd Revised 04/2003
Printed Name:	abriformslabnam Revised 04/2003
Capacity:	
(see instruction # 9 on back of form)	8/6

## INSTRUCTIONS

Optional: If the document	is incorrect where can	you be reached for corrections?	
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- 1. Line 1 Enter the name of the assumed business name as it currently is filed with the Office of the Secretary of State.
- 2. Line 2 Enter the date the assumed business name was file with this office and under what file number (your file number will start with "D")
- 3. Line 3 Mark this box only if you wish to cancel the entire filing of the assumed business name.
- 4. Line 4 If this amendment is to change name of the business you may indicate the new business name here. It is advised that you contact the Office of the Secretary of State to check to see if someone has already filed for the name you would like to use.
- 5. Line 5 If this amendment is to add or delete an owner of the assumed business name you do so in this area. Note: This is not where you change the name of the company.
- 6. Line 6 If this amendment is to change the type of business being transacted you do so in this area.
- 7. Line 7 If you would like to change the mailing address for future correspondence sent from this office you do so in this area.
- 8. Line 8 Enter the address for the acknowledgement copy of this amendment.
- 9. The certificate must be signed by an individual who has actual authority to bind the business to legal obligations. The signer must indicate his or her capacity (president, partner, proprietor, etc.) below his\her signature.
- 10. The fee for filing an amendment is \$10.00. There is no fee for filing a cancellation.
- 11. Submit this form and fee to:

Secretary of State 700 West Jefferson - Basement West PO Box 83720 Boise ID 83720-0080

Pursuant to Idaho Code § 67-910(6), the Secretary of State's Office may delete a business entity filing from our database if payment for the filing is not completed.

12. If you have any questions you may contact the commercial division at (208) 334-2301.